## City of Newcastle upon Tyne

## MARRIAGE ACT 1949 CIVIL PARTNERSHIP ACT 2004

The Marriages and Civil Partnerships (Approved Premises) Regulations 2005

## **Application Questionnaire**

1. Full name and address of applicant. If the application is made by a limited company please give the address of	Name: Address:		
the registered office and where different also the main trading address of the Company	Telephone No: Main trading address (of Company)		
2. Name, address and telephone number of the premises the subject of this application	Name: Address:		
	Telephone No:		
3. Name, address and occupation of	Name:		
the proposed "Responsible Person"	Occupation:		
	Address:		
	Telephone Number:		
4. In relation to the premises at 2	Nature of building:		
above: please describe their nature	Uses:		
(e.g. hotel, civic accommodation,	C ses.		
stately home) and the primary and			
other uses to which they are regularly			
put			
5. Is the person or company named in	Yes / No		
reply to question 1 the occupier of the			
premises?			
6. If the answer to question 5 above is	Name(s)		
"No" and there is another occupier,	Address(es)		
please give their name(s) and			
address(es)			
7. Please describe the room(s) it is			
proposed to use for the conduct of			
civil marriage/civil partnership			
ceremonies (e.g. ground floor			
conference room, first floor etc)	V /N-		
8. Will this room(s) be available for	Yes / No		
regular use as a venue for civil marriages/civil partnerships?			
9. Please state here the maximum	state name & permitted number for each room		
number of people that are	state name & permitted number for each roompersons		
recommended to occupy the room(s)	roompersons		
and the second s	roompersons		
	roompersons		
	roompersons		
	room persons		

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	roompersons
10. Please identify an additional,	1
separate room in which the Registrars	
may use prior to the ceremony to	
interview the couple to be married/to	
form a civil partnership	
11. Has the applicant complete	Yes / No
control over the internal corridors	
adjacent to the room(s)? If only	
partial control, please state what other	
use is made of the corridors	
12. Has the applicant complete	Yes / No
control over any external areas (e.g.	
courtyards, passageways) on which	
premises abut? If only partial control	
please state what other use is made of	
these abutting areas	
13. Have the premises at 2 above any	Yes / No
recent or continuing connection with	
any religion or religious activity? If	
so, please provide details	
14. If the applicant is an organisation	
e.g. limited company, registered	
charity, board of trustees or other	
organisation, please enter the status	
of that body	Yes / No
15. Do the premises currently have	Tes / NO
the benefit of any licence authorising	
use for regulated entertainment or	
similar purpose? If so, please attach a	
copy	

a .	C	•	
Signature	$\alpha$ t	ann	licant
Dignature	OΙ	app	mani

Date

## **Data Protection Act 1998**

The information you provide on this form will be used by Newcastle City Council for the purpose of licensing.

If you have any queries concerning the data protection, please contact the City Council's Data Protection Officer, Peter Dinsdale on 0191 2777038 or by e mail at <a href="mailto:peter.dinsdale@newcastle.gov.uk">peter.dinsdale@newcastle.gov.uk</a>

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